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# Introduction, Values, and Communication

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# Welcome to Puberty Talk!

## **Session 1:**

### Introduction, Values, and Communication

#### **Goals:**

- Create a safe space for students to discuss sexual health topics and inform students of their reproductive and sexual health rights and resources
- Provide opportunities for students to ask sexual health questions throughout program without embarrassment
- Give students practice at identifying and articulating their personal beliefs and values within a peer environment
- Recognize the importance of parent and trusted adult communication when it comes to understanding sexual health topics.

## **Session 1:**

### Introduction, Values, and Communication

## **Objectives:**

At the end of this session, students will be able to:

- Name one place that offers help with sexual health needs
- Utilize the anonymous question box
- Identify one trusted adult in their lives that they can communicate with about their bodies, sex, and relationships
- Identify one value they hold about sex or sexual activity

# Puberty Talk Agreements

1) Respect

2) Privacy

3) It's okay to feel embarrassed!

# Anonymous Question Box

## **Introduction to the Anonymous Question Box:**

The Anonymous Question Box is a way for students to ask questions that they may not feel comfortable asking during class time, though students are encouraged to ask lots of questions during class time as well.

## **Anonymous Question Box Guidelines:**

- Everyone must put a paper in the box. If students do not have a questions at that time, they can write a statement about what they learned in class that day, a specific topic of interest, or write "no question". This ensures questions remain anonymous.
- No Names. Questions are anonymous and are not to be used t hurt or embarrass others. Questions with names on them will not be read out loud.
- No personal questions of the instructor.
- Nobody can take anything out of the Question Box, except for the instructor.

# Pre-Test

## TTAAA Puberty Talk **Pre Test**

Circle the correct answer.

1. The **changes** that occur during puberty usually **happen:**

- A.** Overnight                      **B.** Over 1 year                      **C.** Over several years                      **D.** Not Sure
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2. During puberty, **most females:**

- A.** Start their period                      **B.** Grow hair under their arms                      **C.** Both of these                      **D.** Not sure
- 

3. The part of the **male body** that **makes sperm** cells is the:

- A.** Ovary                      **B.** Testicle                      **C.** Penis                      **D.** Not sure
- 

4. In order to **make a baby**, a sperm cell must fertilize (join with) an ovum (egg).

- True                       False                       Not sure
- 

5. **Females ovulate (release eggs)** from their ovaries from the time they are born.

- True                       False                       Not sure
- 

6. It is **normal for males** to get **erections**, even when they are not thinking sexual thoughts.

- True                       False                       Not sure
- 

7. Sexual consent requires which of the following?

- A.** Both partners are 18 or older (in CA)                      **B.** Both partners are sober (not drunk or high)                      **C.** Both partners verbally agree ("Yes!")                      **D.** A, B, and C

There is no correct answer to these questions. Answer how you feel.

8. I feel confident that I could tell someone to stop making fun of another person's body or looks.

- True                       False                       Not sure
- 

9. I feel confident that I could tell someone to stop touching me in a way that makes me feel uncomfortable.

- True                       False                       Not sure



## TTAAA Teen Talk Pre Test

Circle the correct answer.

- 1. Which type of birth control method helps protect against pregnancy and STIs?**  
A. Birth control pill                      B. Condom                      C. Ring                      D. Not Sure
- 2. Choose the fluid that can pass HIV.**  
A. Saliva                      B. Sweat                      C. Blood                      D. Not Sure
- 3. In a healthy relationship, both people feel...**  
A. Afraid                      B. Frustrated                      C. Respected                      D. Not Sure
- 4. Anyone who is having sex should get a regular check-up at a clinic.**

TRUE

FALSE

NOT SURE

- 5. Name ONE local clinic** where a teen can go to for FREE and CONFIDENTIAL sexual health services.  

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- 6. What must someone do before they have sex with someone?**  
A. Ask politely and wait                      B. Hold hands                      C. Buy them gifts                      D. Not Sure  
for the "YES"

- 7. If someone is sexually assaulted, it is never their fault.**

TRUE

FALSE

NOT SURE

- 8. Who could you talk to if someone touched you sexually and you didn't want them to?**  

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There is no correct answer to these questions. Answer how you feel.

- 9. I feel comfortable going to a clinic for sexual health services.**      YES      NO      NOT SURE
- 10. I can talk about sexual health with a parent or trusted adult.**      YES      NO      NOT SURE
- 11. I can talk to a current or future partner about what I want to or don't want to do sexually.**      YES      NO      NOT SURE

# TTAAA Teen Talk Pre Test

Circle the correct answer.

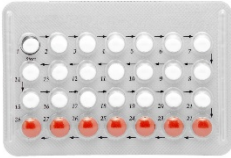
1. Which type of birth control method helps protect against pregnancy and STIs?

B. Birth control pill

B. Condom

C. Ring

D. Not Sure



2. Choose the fluid that can pass HIV.

B. Saliva

B. Sweat

C. Blood

D. Not Sure



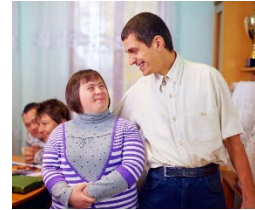
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B. Afraid

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C. Respected

D. Not Sure



4. Anyone who is having sex should get a regular check-up at a clinic.

TRUE

FALSE

NOT SURE



5. Name ONE local clinic where a teen can go to for FREE and CONFIDENTIAL sexual health services.

\_\_\_\_\_



6. What must someone do before they have sex with someone?

B. Ask politely and wait for the "YES"



B. Hold hands



C. Buy them gifts



D. Not Sure



7. If someone is sexually assaulted, it is never their fault.

TRUE



FALSE



NOT SURE



8. Who could you talk to if someone touched you sexually and you didn't want them to?

\_\_\_\_\_



There is no correct answer to these questions. Answer how you feel.

9. I feel comfortable going to a clinic for sexual health services.

YES



NO



NOT SURE



10. I can talk about sexual health with a parent or trusted adult.

YES



NO



NOT SURE

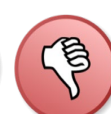


11. I can talk to a current or future partner about what I want to or don't want to do sexually.

YES



NO



NOT SURE



# COMMUNITY RESOURCE LIST

## Grief and Loss

**Cancer Support Community**  
805 379-4777  
[cancersupportvvsb.org](http://cancersupportvvsb.org)

**Hospice of the Conejo**  
805 495-2145  
[hospiceoftheconejo.org](http://hospiceoftheconejo.org)

## Housing and Food

**Area Housing Authority**  
805 480-9991  
[ahacv.org](http://ahacv.org)

**Manna**  
805 497-4959  
[mannaconejo.org](http://mannaconejo.org)

**Rain (Transitional Living Center)**  
805 383-7505  
[raincommunities.org](http://raincommunities.org)

**Food Share**  
805 983-7100  
[foodshare.com](http://foodshare.com)

**Many Mansions**  
805 496-4948  
[manymansions.org](http://manymansions.org)

**The Samaritan Center of Simi Valley**  
805 579-9166  
[samaritancentersimivalley.org](http://samaritancentersimivalley.org)

## LGBTQ

**PFLAG**  
818 991-4797 x 27  
[pflag.org/chapter/pflag-oak-parkconejo-valley](http://pflag.org/chapter/pflag-oak-parkconejo-valley)

**Rainbow Umbrella**  
805 836-0099

**Trevor Project**  
24/7 Trevor Lifeline: 866 488-7386  
[thetrevorproject.com](http://thetrevorproject.com)

## Medical

**Clinicas del Camino Real**  
805 498-3640  
[clinicas.org](http://clinicas.org)

**Conejo Free Clinic**  
805 497-3575  
805 328-3100—Dental  
[conejofreeclinic.org](http://conejofreeclinic.org)

**Westminster Free Clinic**  
805 241-8366  
[westminsterclinic.org](http://westminsterclinic.org)

## Mental Health

**CLU Community Counseling**  
805 493-3390  
[clucounseling.org](http://clucounseling.org)

**National Alliance on Mental Illness (NAMI)**  
Helpline: 805 500-6264  
[namiventura.org](http://namiventura.org)

**VCBH—Early Detection and Intervention for the Prevention of Psychosis (EDIPP)**  
805 981-8865  
[vcbh.org/en/adult-services-early-intervention](http://vcbh.org/en/adult-services-early-intervention)

**Coalition for Family Harmony**  
805 983-6014  
[thecoalition.org/](http://thecoalition.org/)

**Ventura County Behavioral Health (VCBH)**  
866 998-2243  
[vcbh.org/en/programs-services/youth-family-services](http://vcbh.org/en/programs-services/youth-family-services)

**VCBH—Rapid Integration Support and Engagement (RISE)**  
805 981-4233  
[vcbh.org/en/get-help/rise-program](http://vcbh.org/en/get-help/rise-program)

**Interface Children and Family Services**  
805 485-6114 x 662 (Main Number)  
805 371-5707 (Thousand Oaks)  
[icfs.org/services/mental-health/](http://icfs.org/services/mental-health/)

**Youth Crisis Line—Interface**  
805 469-5882  
[icfs.org/services/youth-crisis-homeless-services/](http://icfs.org/services/youth-crisis-homeless-services/)

## Parenting

**Parent Child Interactive Therapy (PCIT) (2-8 years old)**  
805 485-6114 x 662  
[icfs.org/services/mental-health/](http://icfs.org/services/mental-health/)

**Triple P—Positive Parenting Program (0-5 years old)**  
805 485-6114 x 625  
[icfs.org/services/mental-health/](http://icfs.org/services/mental-health/)

**United Parents**  
805 384-1555  
[unitedparents.org](http://unitedparents.org)

# Local Teen Clinics

Parents' permission is **NOT** required in CA (but we encourage you to talk with them!)  
Services are **FREE** and **CONFIDENTIAL**

• \_\_\_\_\_  
website: \_\_\_\_\_  
phone: \_\_\_\_\_  
address: \_\_\_\_\_  
\_\_\_\_\_

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**[www.familyPACT.org](http://www.familyPACT.org)** – Find local clinics and sign up for the state-funded Family PACT program  
**[www.myhealthmyinfo.org](http://www.myhealthmyinfo.org)** – Utilize confidential services at your pediatrician or doctor's office

# What are values?

**values**  
(beliefs or morals)

# Pick-a-Side

Agree

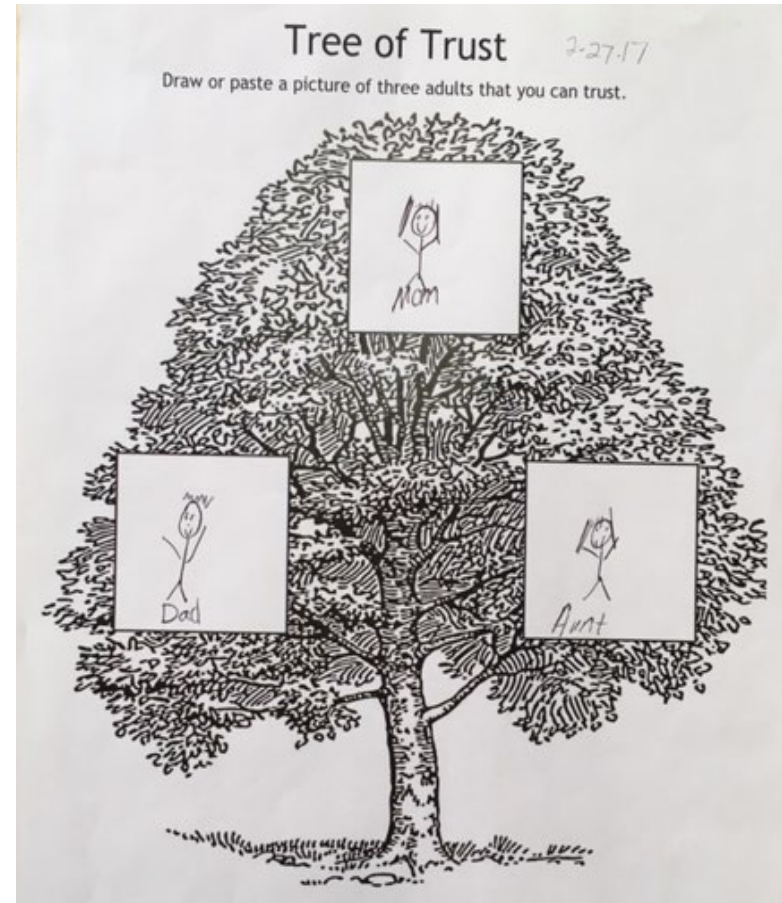
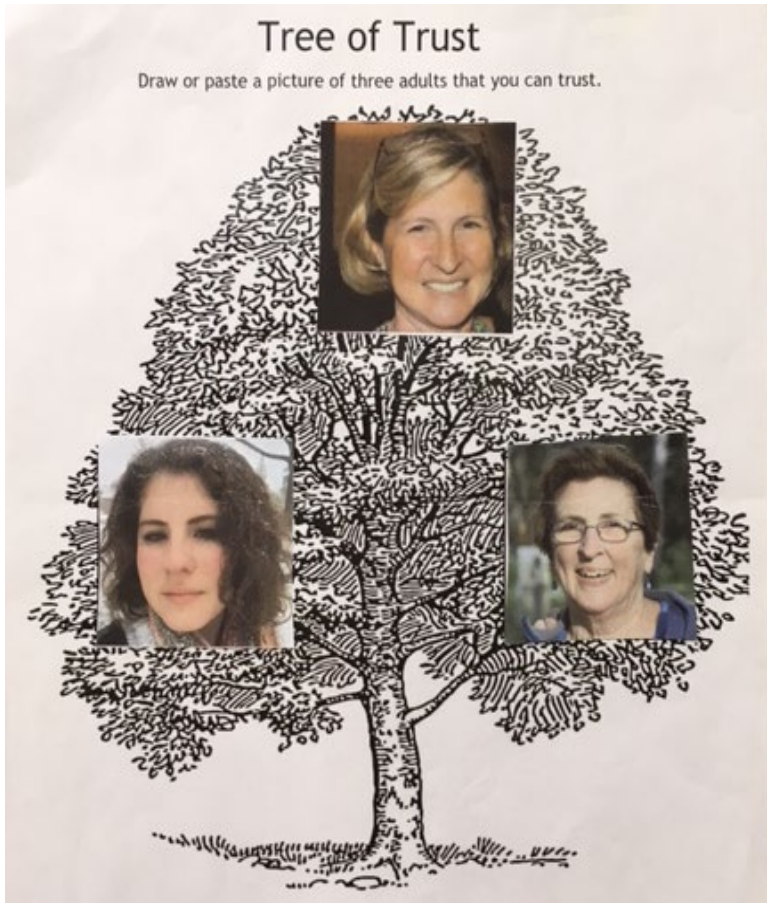
Disagree



Insert  
statement  
here



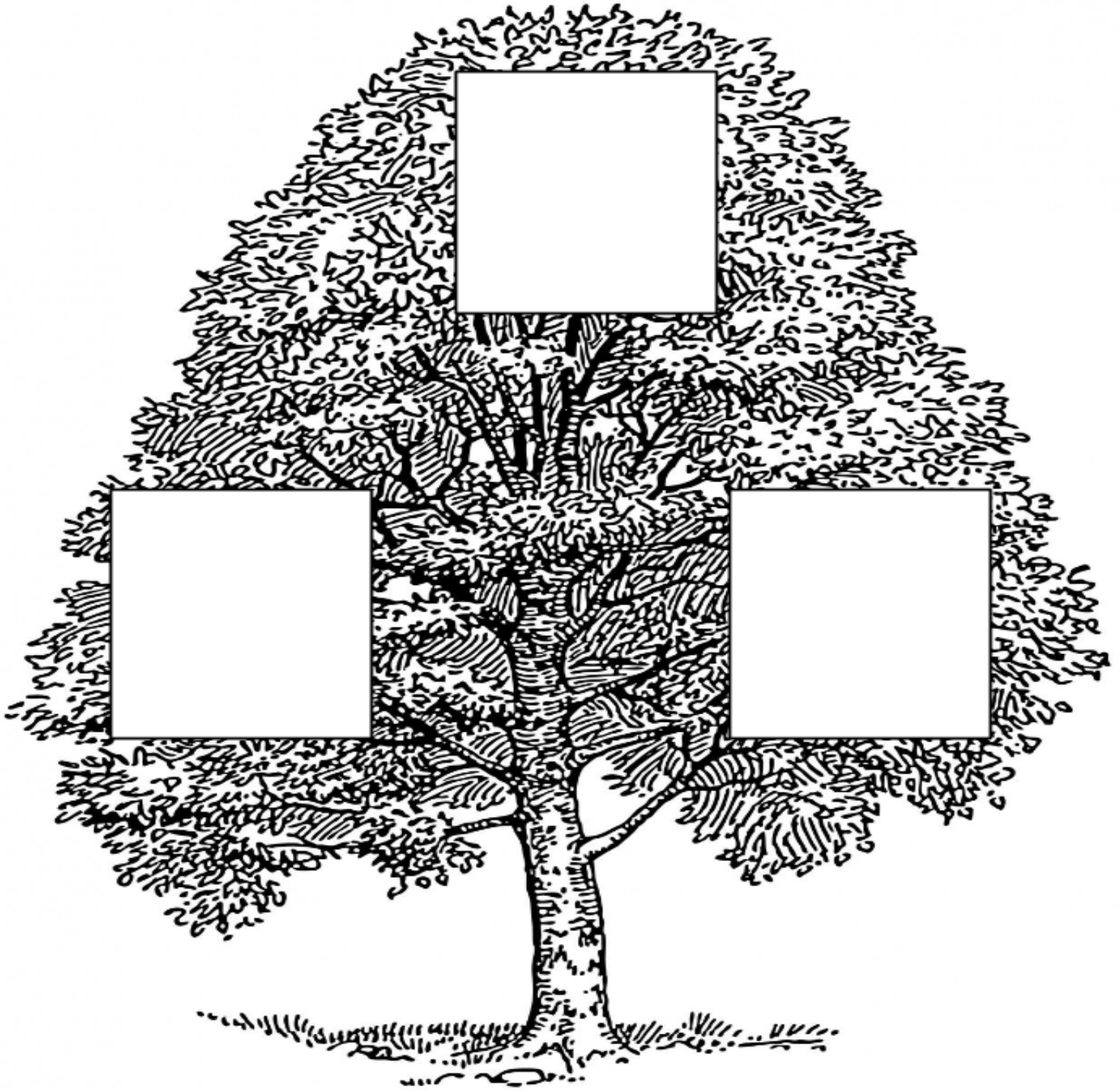
# Tree of Trust (homework)





# Tree of Trust

*Directions:* Draw or paste a picture of up to three adults that you can trust.



I can talk to \_\_\_\_\_, \_\_\_\_\_,  
and \_\_\_\_\_ about sex, relationships, and my body.